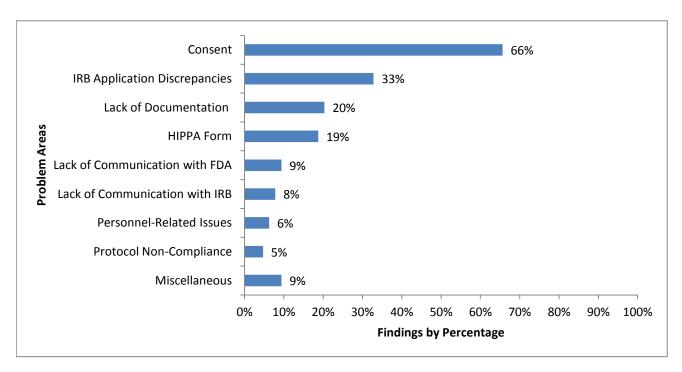
## **Problem Areas Identified in CQI Assessments**



## **CQI AT-A-GLANCE**

First assessment: 5/2008

To Date: 21 Assessments; 2 required Follow-up (21 investigators; 23 visits)

Total Number of Studies Audited: 64

11 UPC investigators 10 HSC investigators

## DETAILS OF PROBLEM AREAS

**Consent + HIPAA form Issues:** no documentation of consent; use of unapproved consent; missing subject name, signature, or signature date; missing PI signature; use of wrong HIPAA form; HIPAA form not signed by subjects; required fields not completed in HIPAA form

**IRB Application Discrepancies:** discrepancies between IRB application and study procedures; unable to locate approved documents in iStar; study personnel different from those in application; personnel obtaining consent is different from that in application

**Lack of Documentation:** no documentation of subjects meeting inclusion/exclusion criteria; no regulatory binder or substantial documentation missing

Personnel-Related Issues: lack of GCP training; lack of personnel; lack of personnel oversight

**Lack of Communication with FDA:** personnel listed on Form 1572 form differs from IRB application; missing information in Form 1572; lack of annual progress report for investigator-initiated studies

**Lack of Communication with IRB:** done in untimely manner; study closure report not submitted; protocol deviations not reported to IRB

**Protocol Non-Compliance:** differences between protocol and study procedures; inclusion/exclusion violations

**Miscellaneous:** potential for subject coercion; funding not distributed to proper channel, investigator unaware of consent requirement for all subjects and study closure responsibilities